The book Keys to EMR Success is an excellent resource for medical practices that are considering EMR implementation. Sterling provides medical practices with a robust set of checklists, guidelines, and considerations that will help assure a comprehensive planning process. The book does not represent a particular EMR, making it helpful regardless of the style of EMR a medical practice might consider.

The book has a number of features that support EMR selection. A particularly unique aspect of the book is the use of tips, alerts, and cautions in each of the sections. Sterling uses these flags to draw the reader to areas that might be overlooked or areas that are of particular importance. The author frequently gives examples of these flagged items, and this clarifies the issue at hand. When comparing different EMR solutions, the author gives the reader a series of questions to ask vendors. This is very helpful because it creates consistency in the process. Similar to asking different applicants for a job the same questions, the consistent EMR questions will allow the solutions to be evaluated using comparable information. Another important suggestion is the use of scenarios to understand the performance of the solutions. Sterling recommends developing a few important scenarios that reflect familiar processes when using the EMR. He states this will give reviewers a good feel for the system’s use with clinical content and make sure that the demonstration does not avoid potential weak areas in the design. For example, a scenario for an ophthalmology office with multiple physicians might include the handling of a rush of phone calls from patients about post-op symptoms, medication refills, pre-op questions, and physician-to-physician consultation requests. Understanding how the software supports this work will help with the detailed analysis.

The weakest section of the book is the first chapter, the rationale for purchasing an EMR. Sterling lacks empirical evidence to support his statements. For example, Sterling states, “EMRs will become a required tool for physician practices to meet patient expectations” (p. 5). This is contradicted in the study by Linz and Fallon (2008), namely that the public does not regard EMR as important. Therefore I would not recommend using the book to develop a position on EMR, but once the decision to purchase an EMR is made the book will be extremely valuable.

An area that would benefit from further development is the section on implementation. It covers technical aspects very well but could be better in discussing the development of the communication plan and team management. An excellent study on this was published by Spratt and Dickson (2008), which highlights the importance of understanding team dynamics and training during EMR implementation.

Despite these minor flaws, this book is a great resource that I would recommend when considering an EMR implementation. AE

Notes

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